



**INFECTION PREVENTION AND CONTROL**  
**ANNUAL REPORT – Nova Healthcare**  
**2017**

<b>Ratifying Committee/Board</b>	<b>Date of Ratification</b>
Nova Healthcare Infection Prevention & Control Committee	6 February 2018
Aspen Group Infection Prevention & Control Committee	31 January 2018

# INFECTION PREVENTION AND CONTROL

## ANNUAL REPORT 2017

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# **INFECTION PREVENION AND CONTROL ANNUAL REPORT 2017**

## **EXECUTIVE SUMMARY**

The Health and Social Care Act (2008) Code of Practice on the Prevention and Control of Infection and Related Guidance (The Hygiene Code) requires that an annual report is produced by each Healthcare Facility.

This report covers the period January to December 2017 and informs the boards of Aspen and Nova Healthcare of the progress being made to prevent Healthcare Associated Infection and to agree proposed objectives for improvements in infection prevention and control for 2018.

In March 2015, Aspen Healthcare became a new shareholder in Nova Healthcare and at the same time was awarded a management contract for the organisation.

The Director of Infection Prevention and Control and the Consultant Nurse for Infection Prevention and Control at Aspen Healthcare, have worked closely with the Executive Director, Director of Clinical Services and the team at Nova Healthcare to develop Infection Prevention and Control Structures that will ensure compliance with the requirements of the Hygiene Code.

Nova Healthcare is situated on level 4 of the Bexley wing of St James's University Hospital Leeds, which is part of The Leeds Teaching Hospitals NHS Trust (LTHT). Aspen Healthcare and Nova Healthcare work closely with LTHT to ensure that governance requirements of all parties are met and that the infection prevention and control strategy, practice and procedures are communicated in an effective and timely manner to the host organisation.

# **INFECTION PREVENION AND CONTROL**

## **ANNUAL REPORT 2017**

### **Introduction**

This report will provide a review of Infection Prevention and Control (IPC) at Nova Healthcare during 2017. It includes:

- Infection Prevention & Control activity, surveillance and incidents - during 2017
- A review of the progress with the 2017 objectives
- Sets the objectives for the Aspen Group Infection Prevention & Control Programme 2018.

The format of the report uses the ten compliance criterion of the Health and Social Care Act (2015) Code of Practice on the Prevention and Control of Infections and Related Guidance (also known as The Hygiene Code) and details how Aspen Healthcare ensures compliance with The Hygiene Code. Evidence is also provided to demonstrate the low rates of infection across the Group, the monitoring and surveillance methods used to ensure that infection rates remain low and that high standards of IPC are assured.

### **Review of Compliance with the Hygiene Code**

Nova Healthcare is registered with the Care Quality Commission (CQC) under the Health and Social Care Act (2008). As a legal requirement Nova Healthcare must protect patients, staff and others from acquiring healthcare associated infection by compliance with the Hygiene Code.

Table One (on page 5) provides an assessment of current compliance with each of the ten criteria of the Hygiene Code.

This report clearly demonstrates that Nova Healthcare clinical areas are compliant with the requirements of the Hygiene Code.

**Table One: Review of Compliance with the Hygiene Code**

Compliance Criteria	Level of Compliance against Criteria
Systems to manage and monitor the prevention and control of infection. These systems use risk assessments and consider how susceptible service users are and any risks that their environment and others may pose to them	Green
Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections	Yellow
Ensure appropriate antimicrobial use to optimize patient outcomes and to reduce the risk of adverse events and antimicrobial resistance	Green
Provide suitable accurate information on infections to service users, their visitors and any persons concerned with providing further support or nursing/medical care in a timely fashion	Green
Ensure prompt identification of people who have or are at risk of developing an infection so that they receive timely and appropriate treatment to reduce the risk of transmitting infection to other people	Green
Systems to ensure that all care workers (including contractors and volunteers) are aware of and discharge their responsibilities in the process of preventing and controlling infection	Green
Provide secure and adequate isolation facilities	Green
Secure adequate access to laboratory support as appropriate	Green
Have and adhere to policies, designed for the individual's care and provider organisations, that will help to prevent and control infections	Green
Providers have a system in place to manage the occupational health needs and obligations of staff in relation to infection	Green

**Key:**

- Green:** Full compliance across the Group
- Yellow:** Moderate compliance across the Group
- Amber:** Partial compliance across the Group
- Red:** Non-compliance across the Group

## CRITERION ONE

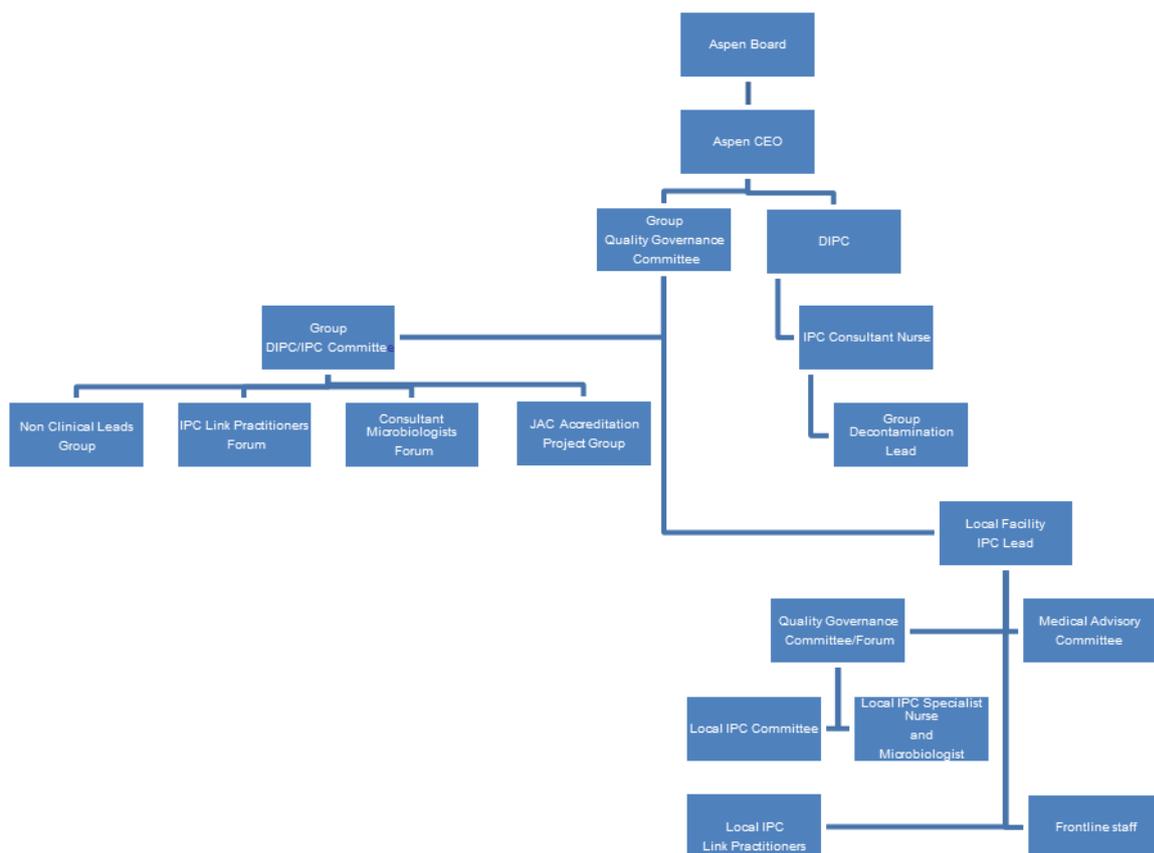
*“Systems to manage and monitor the prevention and control of infection. These systems use risk assessments and consider how susceptible service users are and any risk that their environment and other users may pose to them”*

### IPC Structure

As part of its contract with Leeds Teaching Hospitals NHS Trust (LTHT), Nova Healthcare has to comply with the infection prevention and control policies developed by the Trust and to assure the Trust that IPC systems and appropriate practices are in place.

The Clinic Manager at Nova Healthcare holds overall accountability and responsibility for day to day IPC issues. The Clinic Manager works closely with both the Consultant Nurse for IPC at Aspen Healthcare and IPC Matron at Leeds Teaching Hospitals NHS Trust.

### IPC Accountability Infrastructure



## Infection Prevention & Control (IPC) Team & Committee

The Clinic Manager is the IPC Link Practitioner for Nova Healthcare, and attends the Aspen Group IPC Committee which is chaired by the Aspen DIPC.

Nova Healthcare IPC forms part of the quarterly Governance Committee which reports up into the Aspen Group IPC Committee.

Audit reports are submitted to Aspen Healthcare's Director for Infection Prevention and Control (DIPC) and Aspen's Board via the Aspen Group Infection Prevention and Control Committee. These are also reported to the Nova Healthcare Quality Governance Committee, the Medical Advisory Committee and the HTI St James' Board via the Clinic Manager.

## Infection Prevention & Control Strategy

An Aspen Group IPC Strategy is in place in line with the requirements of the Hygiene Code; it details the role and responsibilities of the core members of the local IPC Team and the members of the local IPC Committee.

## Audit

Nova Healthcare undertakes IPC audits in line with the annual audit schedule, which is shown below:

AUDIT SCHEDULE SUMMARY 2017												
AUDIT	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Infection Prevention and Control												
Hygiene Code Weekly Checklist	x	x	x	x	x	x	x	x	x	x	x	x
PLACE					x							
IPC Environmental & Clinical Practice	x			x			x			x		
High Impact Intervention Hand Hygiene	x			x			x			x		
Deep Dive - Corporate Audit on infection prevention and control practices							x					
Hand Hygiene Observational Audit	x	x	x	x	x	x	x	x	x	x	x	x
Outpatient Services Patient Turnover			x			x			x			x
Antimicrobial Stewardship	x			x			x			x		

During the year 100% of infection prevention and control audits were performed, with improvement plans formulated. A systematic review process has been implemented to ensure that any changes implemented have been embedded.

## HII Audits

As part of the Aspen Healthcare Audit Programme, Nova Healthcare undertakes the National Saving Lives High Impact Intervention Audits as appropriate for the unit;

Nova also undertakes an Outpatient Services Turnover Audit, which was developed by the Aspen Consultant Nurse for IPC and was added to the High Impact Intervention Audits.

These audits are based on an evidence-based approach that relate to key clinical procedures or care processes that can reduce the risk of infection if they are performed appropriately. These audits facilitate accurate monitoring of compliance with IPC policies, procedures and guidelines.

## **Infection Prevention & Control Environmental and Clinical Practice Audit**

Results from the Environmental and Clinical Practice Audit are submitted quarterly to the Aspen IPC Committee, and are also discussed at the local Governance Committee. Improvement plans are formulated to address any areas of poor compliance, and these are monitored to ensure continuous improvement.

### **CRITERION TWO**

*“Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections”*

#### **‘Deep Dives’**

Monitoring the healthcare environment has required a multi-faceted approach as both patient and non-patient areas must be assessed. The Aspen Consultant Nurse for IPC and the Group Head of Health and Safety work together to undertake an annual ‘Deep-Dive’ inspection of Nova.

A comprehensive report of the findings from this inspection in June 2017 were submitted to the Clinic Manager of Nova Healthcare. They are also submitted to the Director of Infection Prevention and Control. Where remedial action is required, RAG rated action plans are in place and these are reviewed at the local Governance Committee.

#### **Water Quality Monitoring**

Nova Healthcare is situated within the Bexley Wing of St James’s Hospital. This is a newly built PFI building which is managed by the Estates Department of St James’s Hospital and Engie. Water Quality Monitoring falls within their remit and Nova has requested documentary evidence that results are within limits and where necessary remedial action would be taken.

#### **Standardisation of Products**

All supplies at Nova Healthcare are provided through a service level agreement between Nova Healthcare and the Leeds Teaching Hospitals Trust with approved supplies being issued via the RDC at Normanton.

#### **Patient Led Environmental Assessment Tool (PLACE)**

PLACE is a national system for assessing the quality of the patient environment and journey and is run by NHS England and the Health and Social Care Information Centre (HSCIC), which changed its name in July 2016 to NHS Digital.

The assessment team includes patients/service users or their carers, and their remit is to assess aspects of the patient journey including privacy and dignity, food, cleanliness and general building maintenance. Assessment focusses entirely on the care environment and does not cover clinical care provision.

Nova Healthcare did its second PLACE audit in May 2017, having a team of patients and staff to assess against the criteria.

### **Decontamination**

Nova has a contract in place for decontamination with B Braun Sterilog for reusable medical equipment.

### **CRITERION THREE**

*“Ensure appropriate antimicrobial use to optimise patient outcomes and to reduce the risk of adverse events and antimicrobial resistance”*

Nova Healthcare is contractually bound to follow local Antimicrobial Prescribing policies issued by the Trust. Policies are categorised by speciality and Nova Healthcare will adhere to the LTHT Adult Treatment Antimicrobial and Infection Guideline for Non-surgical Oncology, Haematology and Palliative Care, Guideline for Adult Neutropenic Sepsis and Guideline for Catheter Associated Urinary Tract Infections in Adults. All Policies and guidelines are approved by the LTHT Improving Antimicrobial Prescribing Group.

All specimen sensitivities obtained via the results service are discussed with the appropriate physician for prescribing of antimicrobial medications or modification to previously prescribed medications.

Nova Healthcare has a nominated Lead Pharmacist from LTHT with whom Nova Healthcare would consult for discussions on service provision or advice about medications. Nova Healthcare also has support from the Aspen Group Chief Pharmacist.

### **CRITERION FOUR**

*“Provide suitable accurate information on infections to service users, their visitors and any person concerned with providing further support or nursing/medical care in a timely fashion”*

#### **Patient Information**

Nova Healthcare provides patients with MRSA Screening and Decolonisation: information for patients as required.

Any specific further information requirements are discussed with the clinical staff and appropriate information obtained from LTHT.

#### **Communication**

Nova Healthcare has established an IPC information folder for all staff to access, which displays IPC information from both Aspen Healthcare and LTHT.

## **Patient Survey Results**

Nova Healthcare commenced using Howard Warwick Associates Consulting for their patient satisfaction surveys, in line with the Aspen group in April 2016. Reports are published quarterly, which provides the unit with feedback on quality of care and cleanliness of the facility.

## **Policy for the Admission, Discharge or Transfer of Patients with Known or Suspected Infections**

In the event of a patient being found to have a known or suspected infection, Nova Healthcare would follow LTHT guidelines for Source Isolation of any patient having known or suspected infection.

Nova Healthcare has never had to transfer a patient with a known or suspected infection. Should this event occur, Nova Healthcare would follow the Transfer and Handover of care procedure on Leeds Health Pathway approved by their Head of Nursing, Professional Practice and Clinical Standards of Patient Safety. A transfer checklist is available on the LTHT intranet site.

## **Policy for the Management of Overseas Patients**

Any overseas patient would be pre-assessed prior to any treatment and would be screened for MRSA and other micro-organisms as per the LTHT MRSA and IPC Policies.

## **CRITERION FIVE**

*“Ensure prompt identification of people who have or are at risk of developing and infection so that they receive timely and appropriate treatment to reduce the risk of transmitting infection to other people”*

### **Consultant Microbiologist**

Nova Healthcare has a contract with LTHT for the services of their microbiology laboratory and advice from their Consultant Microbiologist.

### **Surveillance of Healthcare Acquired Infection (HCAI)**

There is no formal process in place at present for surveillance of Nova Healthcare’s patients. However, all patients are day-cases and are followed up as outpatients. If there are indications of infections the Aspen Consultant Nurse for IPC would be informed and an investigation instigated. During 2017 no infections were reported.

### **Incidents**

There were no incidents recorded that related to IPC issues in 2017.

## **CRITERION SIX**

*“Systems to ensure that all care workers (including contractors and volunteers) are aware of and discharge their responsibilities in the process of preventing and controlling infection”*

## **Staff Training**

All mandatory IPC training is delivered via the National Skills Academy. The National Skills Academy provides the following eLearning modules:

- Infection Prevention and Control for Non-Clinical Staff
- Infection Prevention and Control Level 1 E-assessment
- Infection Prevention and Control Level 2 E-assessment

At the end of 2017, 100% of clinical staff had completed the Infection Prevention and Control level 1 & 2 assessments. 87.5% of non-clinical staff had completed the Infection Prevention and Control for Non-Clinical Staff

## **Link Practitioners**

The Clinic Manager is the IPC Link Practitioner for Nova Healthcare, and has held this role since her appointment in April 2016. She attended a two day course on IPC Link Practitioner Training in June 2016, and a refresher one day training course in September 2017. This training was provided by the Nurse Consultant for Infection Prevention and Control at Aspen Healthcare.

As per Aspen standard, the IPC Link Practitioner is given one day per month to dedicate to this link role.

## **CRITERION SEVEN**

*“Provide or secure adequate isolation facilities”*

### **Isolation Facilities and Policies**

Nova Healthcare has three side rooms available for patients that require isolation.

In the event of a patient being found to have a known or suspected infection, Nova Healthcare would follow LHTH guidelines for Source Isolation of any patient having known or suspected infection.

Nova Healthcare would normally discuss each case prior to admission with the treating physician to discuss postponement of treatment or continue with treatment and employ source isolation of patient.

Specialist Decontamination of side rooms would be requested via the Trust Housekeeping Supervisor prior to release of the room for on-going use.

## **CRITERION EIGHT**

*“Secure adequate access to laboratory support”*

### **Microbiology**

Nova Healthcare has access to all pathology departments under a service level agreement, as well as access to the on-call microbiologist for St James’s Hospital.

## CRITERION NINE

*“Have and adhere to policies, designed for the individual’s care and provider organisations, that will help to prevent and control infections.”*

### Group IPC Policies

As a condition of Nova’s contract with LTHT, the Trust’s IPC policies must be followed. A GAP analysis of all of the LTHT IPC policies was undertaken to ensure compliance, and where required an action plan for remedial action was developed to achieve full compliance.

## CRITERION TEN

*“Providers have a system in place to manage the occupational health needs and obligations of staff in relation to infection.”*

### Inoculation (Puncture) Injuries

No staff or Consultants at Nova Healthcare have sustained an inoculation injury or near-miss during 2017.

**Table Two: Inoculation Injuries by Type**

Type of Injury	Number of Injuries
Near-miss – No injury sustained but reporting required to review practice and prevent further injury	Nil
Involving Aspen Employees	Nil
Involving Surgeons	Nil
Involving normal practice	Nil
Involving poor disposal	Nil

### Safety Devices and EU Directive

Nova Healthcare complies with LTHT Guidelines for Prevention and Management of an Inoculation Incident / Body Fluid Exposure, approved by the Trust Executive Team of the IPC Committee, with the introduction of items of equipment such as, but not limited to, B Braun Vasofix Safety and Introcan safety cannulae, BD Eclipse Safety needles and Medicina Blunt filling needles and the H&S 2013 EU Safety Directive (Sharps Instruments Regulations 2013).

### **Influenza Staff Vaccine Campaign**

Nova Healthcare uses the occupational health services of LTHT and are included in its Flu campaign which was run through October 2016 with pop up vaccination locations throughout the Bexley Wing. 67% of Nova Healthcare staff were vaccinated in 2017.

### **E-Learning**

All staff undertake modules of infection prevention and control training through Skills for Health.

### **Link Nurse Hand Hygiene Training**

In-house hand hygiene training using a hand hygiene light box (or similar) has been provided at Nova Healthcare since July 2016. These sessions are held quarterly and within the past 12 months 11 staff members, including seconded radiographers, have completed this training.

### **Induction Training**

All newly appointed staff at Nova Healthcare attend the LTHT corporate induction study day, which covers elements of infection prevention and control. A local induction programme has been formulated for all new starters at Nova Healthcare. This will include a focus on the infection prevention and control strategy.

## REVIEW OF 2017 OBJECTIVES

**Table Three: Review of 2017 IPC Objectives**

Objective	Review
1. Develop action plan to facilitate improvement from WHO Framework Intermediate Level assessment	Green
2. Further develop relationships with Leeds Teaching Hospitals Trust IPC	Green
3. Participate in the Patient Led Assessment of the Care Environment (PLACE)	Green
4. Development of patient information leaflet relating to MRSA screening	Green
5. Development of patient/visitor information leaflet relating to hand hygiene	Green
6. Undertake competence assessments on asepsis for all clinical staff undertaking this type of procedure	Red
7. Improve communication of results of IPC audits to all staff within the unit	Green
8. Aim for target of 100% completion of mandatory training relating to infection prevention and control (12 month rolling)	Yellow
9. Embedding of all aspects of the Hygiene Code checklist as normal working practices e.g. routine cleaning of all cupboards	Yellow
10. Completion of Antimicrobial Stewardship Audits as per audit calendar	Green

**Key:**

- Green:** Full compliance across the Group
- Yellow:** Moderate compliance the Group
- Amber:** Partial compliance the Group
- Red:** Non-compliance across the Group

## IPC OBJECTIVES 2018

The IPC objectives for 2018 (see Table 7 below) have been developed following assessment of all of the requirements of the Hygiene Code. These will allow the service and facilities to move 'beyond compliance' with the Hygiene Code to ensure that IPC practice is seen as a priority by all staff involved both directly and indirectly in patient care.

**Table Four      IPC Objectives 2018**

Objective
1. Maintain a planned and targeted audit programme
2. Implementation of quality framework for Aseptic Non Touch Technique (ANTT)
3. Ensure 100% completion of IPC mandatory training
4. To participate in PLACE 2018 and identify areas for improvement from findings
5. Improve compliance with The Hygiene Code; monthly equipment and storage cleaning
6. Progress outstanding actions from the findings of the PLACE 2017 audit